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ABSTRACT

This digest defines attention deficit disorders (ADD), provides the attention span, hyperactivity, and impulsivity criteria for diagnosing ADD, and identifies successful strategies for teachers working with children with ADD. Strategies are provided for: (1) establishing the proper learning environment, including seating students with ADD near the teacher's desk, placing these students up front with their backs to the rest of the class, surrounding students with ADD with good role models, and avoiding distracting stimuli; (2) giving instructions to students with ADD/ADHD, such as maintaining eye contact during verbal instructions, making directions clear, simplifying complex directions, repeating instructions if needed, making certain students comprehend the instructions before beginning the task, and helping students feel comfortable with seeking assistance; (3) giving assignments, including giving out only one task at a time, monitoring frequently, modifying assignments as needed, developing an individualized education program, giving extra time, and making sure knowledge is tested and not attention span; and (4) modifying behavior and enhancing self-esteem by providing supervision and discipline by having pre-established consequences for misbehavior and administering consequences immediately and consistently, and providing encouragement by rewarding more than punishing and praising, good behavior and performance. (CR)

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Teaching Children with Attention Deficit/Hyperactivity Disorder: Update 1998

Defining Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder (ADD/ADHD)

Attention deficit disorder is a syndrome characterized by serious and persistent difficulties in the following three specific areas:

1. Attention span.
2. Impulse control.
3. Hyperactivity (sometimes).

ADD is a chronic disorder that can begin in infancy and extend through adulthood, having negative effects on a child's life at home, school, and within the community. It is conservatively estimated that 3 to 5% of our school-age population is affected by ADD.

The condition previously fell under the headings, "learning disabled," "brain damaged," "hyperkinetic," or "hyperactive." The term attention deficit disorder was introduced to describe the characteristics of these children more clearly.

Diagnosis of Attention Deficit Disorder/Hyperactivity Disorder (ADHD)

According to the criteria in the *Diagnostic and Statistical Manual of Mental Disorders* (4th ed., rev.) (American Psychiatric Association, 1994), to be diagnosed as having ADD/ADHD, the clinician must note the presence of at least 6 of the 9 following criteria for either Attention Span or Hyperactivity/Impulsivity.

Attention Span Criteria

- Pays little attention to details; makes careless mistakes
- Has short attention span
- Does not listen when spoken to directly
- Does not follow instructions; fails to finish tasks
- Has difficulty organizing tasks
- Avoids tasks that require sustained mental effort
- Loses things
- Is easily distracted
- Is forgetful in daily activities

Hyperactivity Criteria

- Fidgets; squirms in seat
- Leaves seat in classroom when remaining seated is expected
- Often runs about or climbs excessively at inappropriate times
- Has difficulty playing quietly
- Talks excessively

Impulsivity Criteria

- Blurts out answers before questions are completed
- Has difficulty awaiting turn
- Often interrupts or intrudes on others

Establishing the Proper Learning Environment

- Seat students with ADD near the teacher's desk, but include them as part of the regular class seating.
- Place these students up front with their backs to the rest of the class to keep other students out of view.
- Surround students with ADD with good role models. Encourage peer tutoring and cooperative/collaborative learning.
- Avoid distracting stimuli. Try not to place students with ADD near air conditioners, high traffic areas, heaters, or doors or windows.
- Children with ADD do not handle change well, so avoid transitions, physical relocation (monitor them closely on field trips), changes in schedule, and disruptions.
- Be creative! Produce a stimuli-reduced study area. Let all students have access to this area so the student with ADD will not feel different.
- Encourage parents to set up appropriate study space at home, with set times and routines established for study, parental review of completed homework, and periodic notebook and/or book bag organization.

Giving Instructions to Students with ADD/ADHD

- Maintain eye contact during verbal instruction.
- Make directions clear and concise. Be consistent with daily instructions.
- Simplify complex directions. Avoid multiple commands.
- Make sure students comprehend the instructions before beginning the task.
- Repeat instructions in a calm, positive manner, if needed.
- Help the students feel comfortable with seeking assistance (most children with ADD will not ask for help).
- Gradually reduce the amount of assistance, but keep in mind that these children will need more help for a longer period of time than the average child.
- Require a daily assignment notebook if necessary.
    1. Make sure each student correctly writes down all assignments each day. If a student is not capable of this, the teacher should help him or her.

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2. Sign the notebook daily to signify completion of homework assignments. (Parents should also sign.)
3. Use the notebook for daily communication with parents.

Giving Assignments

- Give out only one task at a time.
- Monitor frequently. Maintain a supportive attitude.
- Modify assignments as needed. Consult with special education personnel to determine specific strengths and weaknesses of each student.
- Develop an individualized education program.
- Make sure you are testing knowledge and not attention span.
- Give extra time for certain tasks. Students with ADD may work slowly. Do not penalize them for needing extra time.
- Keep in mind that children with ADD are easily frustrated. Stress, pressure, and fatigue can break down their self-control and lead to poor behavior.

Modiying Behavior and Enhancing Self-Esteem

Providing Supervision and Discipline:

- Remain calm, state the infraction of the rule, and avoid debating or arguing with the student.
- Have preestablished consequences for misbehavior.
- Administer consequences immediately, and monitor proper behavior frequently.
- Enforce classroom rules consistently.
- Make sure the discipline fits the "crime," without harshness.
- Avoid ridicule and criticism. Remember, children with ADD have difficulty staying in control.
- Avoid publicly reminding students on medication to "take their medicine."

Providing Encouragement:

- Reward more than you punish, in order to build self-esteem.
- Praise immediately any and all good behavior and performance.
- Change rewards if they are not effective in motivating behavioral change.
- Find ways to encourage the child.
- Teach the child to reward himself or herself. Encourage positive self-talk (e.g., "You did very well remaining in your seat today. How do you feel about that?"). This encourages the child to think positively about himself or herself.

Other Educational Recommendations

- Educational, psychological, and/or neurological testing to determine learning style and cognitive ability and to rule out any learning disabilities (common in about 30% of students with ADD).
- A private tutor and/or peer tutoring at school.
- A class that has a low student-teacher ratio.
- Social skills training and organizational skills training.
- Training in cognitive restructuring (positive "self-talk," e.g., "I did that well").
- Use of a word processor or computer for schoolwork.
- Individualized activities that are mildly competitive or noncompetitive such as bowling, walking, swimming, jogging, biking, karate. (Note: Children with ADD/ADHD may do less well than their peers in team sports.)
- Involvement in social activities such as scouting, church groups, or other youth organizations that help develop social skills and self-esteem.
- Allowing children with ADD to play with younger children if that is where they fit in. Many children with ADD have more in common with younger children than with their age-peers. They can still develop valuable social skills from interaction with younger children.

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For more information on ADD, write to:

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Contact your local school psychologist, examiner, or personnel in charge of assessment and diagnosis in your school district for specific information and local programs.

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